

Elderslie Care Home Care Home Service

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Type of inspection:
Unannounced

Completed on:
29 January 2024

Service provided by:
Advinia Care Homes Limited

Service provider number:
SP2017013002

Service no:
CS2017361010

About the service

Elderslie Care Home is registered with the Care Inspectorate to provide a service to 120 older people. The provider is Advinia Care Homes Ltd.

Elderslie is a large purpose built care home situated on the outskirts of Paisley. The home is set out over two floors and there are four separate units. Each unit has dining and lounge areas, and other smaller rooms for people to use. The ground floor has access to well-developed garden areas.

Whilst the service has capacity for up to 120 single bedrooms with ensuite shower facilities, managers have undertaken a process of consolidation to support improvements. There were 53 people using the service at the time of the inspection, with a current operating capacity of 60 single rooms across two units. The service has plans to increase its capacity in the future and reopen the remaining two units.

About the inspection

This was an unannounced inspection which took place on 23, 24 and 25 January 2024 between the hours of 09.00 and 19.00. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with five people using the service and six of their family
- spoke with 14 staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People and their families expressed a high level of confidence in staff and management of the service.
- Meaningful activity required improvement to meet people's varied needs.
- The service assessed and monitored people's health needs effectively.
- The service had a comprehensive quality assurance system which was used to inform improvement.
- Formal supervision of staff should improve to ensure staff are adequately supported.
- The environment was clean, comfortable, and well presented.
- Meals were well presented, and looked and smelled appetising.
- Menus available at mealtimes offered choice and met people's different dietary needs.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	5 - Very Good
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as **good**, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

People experienced care and support by staff who were kind and compassionate in their interactions. Staff promoted choice and they encouraged people to do things for themselves where they could. This is important in terms of people maintaining skills and to help people achieve individual outcomes. When assisting people to move to a different area, staff were supportive in a caring and encouraging way. Similarly, where some people sometimes got upset, we found that staff were responsive to changes in people's needs, particularly where people experienced stress and distress. This served to reduce incidents of distressed behaviours meaning everyone could feel safe and free from harm. People were able to choose when to get up and had choice around their meals. This reassured us that staff were promoting a culture of it being a person's own home.

The service had recently developed a community café area in the home, and people and their visitors were able to use this area for socialisation whilst visiting. Families we spoke to told us how much they and their loved ones enjoyed using it, and the positive difference it made to their visits. During the inspection, we saw a Burns lunch event taking place and it was great to see the interactions between people, their families, and care staff. People were seen to really be enjoying themselves. We also saw evidence of people's important personal events such as, birthdays or anniversaries which were also celebrated. Involving family and friends reassured us that staff were mindful of these important connections in people's lives and the positive impact these have on emotional and physical health.

Importantly, the notion of activities is not just about big events, it is about what we do as individuals to occupy our time. As such, it is important that care home staff are able to capture the information about what people like to do and how they can involve them regularly in their interests. An area for improvement has been repeated and will be evaluated again at the next inspection. **(See area for improvement 1, and outstanding area for improvement section of the report).**

Making sure that people are kept well is an essential part of social care. People's health and support needs were being regularly monitored, with screening tools in place to identify any risks to them and adjust their support accordingly. Staff were noted to be seeking advice from other professionals to ensure that where people needed specialised support from GPs or specialist nurses, this was promptly and timeously implemented. People's wellbeing, mobility, and confidence was enhanced as the service could evidence a person-centred approach to managing and reducing falls and preventing fractures. This meant that care was responsive so that people got the right support for them at the right time.

People's health and wellbeing benefitted from safe and effective medication management practices. There was a robust overview of medication by the management team. People could be confident they were receiving medication that is right for them because there was timely and regular review of people's medication. We observed people being supported with their medication needs in a dignified and respectful way.

Mealtimes were generally busy, and food looked and smelled appetising. Choices were offered and there were a variety of different menus available each mealtime to ensure people's tastes, diet, and choices were consistently met. People were supported with their meals at a pace suited to their needs. There were a number of people who needed one-to-one support from staff to manage their meals. The service had recently introduced a two sittings service at mealtimes to ensure everyone received the support they needed to be encouraged to eat and drink well. Some people needed to have their food prepared with different textures. It was positive to see that catering staff were proactively ensuring that all information related to people's nutritional needs was up-to-date. Catering staff were also observed to be very skilled in their presentation of textured foods, meaning the food looked appetising and this encouraged people to eat well. People's nutritional support needs were regularly monitored with catering staff demonstrating a good knowledge of their dietary needs and preferences.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore, we evaluated this key question as **very good**.

Staff and families spoke positively about the management team and could see the benefits of the changes made since they had come into post. Staff and families consistently told us they feel more supported, and the current management team are visible and approachable

We found several key improvements since our last inspection. The provider had a robust quality assurance system in place. We saw that audits were being completed consistently, and where improvement was highlighted these improvements were being actioned. This included monitoring accidents and incidents, and where necessary, identifying actions to promote people's wellbeing. This means people's needs and wishes are being met and people are being kept safe and well.

The service had a large service improvement plan in place which was dynamic and responsive. There were some actions in the plan described as ongoing. We discussed with management these actions are probably a feature of everyday work of the service and could be removed. This approach will help to keep a focus on the impact on outcomes for people from planned service improvements.

Internal communication had improved with regular flash meetings, clinical meetings, and information sharing hubs. These all contributed to more effective management oversight and governance.

Records were kept of where people had legal powers in place to support them, such as Power of Attorney, Adults with Incapacity Section 47 certification, and covert medication paperwork. All of these documents contain very important legal powers which allow people to be supported when they no longer have the capacity to make decisions around their support.

How good is our staff team?

4 - Good

We evaluated this key question as **good**, where several strengths impacted positively on outcomes for people, and clearly outweighed areas for improvement.

We saw pleasant and kind interaction between staff and people. Staff knew people well and were able to respond, with good knowledge, when they required assistance. This contributed to people feeling valued and secure. Relatives we spoke to were positive in their feedback about staff. They told us they were confident staff had good skills and knowledge to be able to support their loved ones well.

Staff told us there was good access to eLearning opportunities, and records sampled indicated that compliance rates were high. There had also been support and assistance from the care home collaborative team to provide face-to-face training on a variety of topics. This helped staff increase or refresh their knowledge and skills to be able to support people well.

We saw evidence that staff competencies around aspects of how they support people are being completed regularly. We did see, however, that sometimes these competencies were being assessed by peers. We discussed with management, and they agreed competency assessments should be completed by staff with more experience than the person being assessed.

The service has a specialist unit dedicated to people living with dementia. Training records showed that only 11 members of staff had completed basic dementia training. To help meet the needs of people living with dementia, we advised staff should be supported with appropriate training such as Promoting Excellence programme for dementia learning and development. This would contribute to staff feeling more confident in their role of supporting people, and people could be more confident in the support they would receive. **(See area for improvement 1)**

The process of providing staff with supervision had begun, but this was not consistent or embedded in practice. To ensure people's outcomes benefit from staff who regularly reflect on and discuss their practice, the provider should ensure staff receive regular supervision in line with the providers policy. **(See Area for Improvement 2)**

Areas for improvement

1. To help support meaningful engagement with people living with dementia, the provider should:

- a) ensure that staff are supported with appropriate training, such as, the Promoting Excellence 2021, a framework for all health and social services staff working with people with dementia, their families and carers.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

2. To ensure people's outcomes benefit from staff who regularly reflect on and discuss their practice, the provider should:

- a) ensure they have in place a robust and regular staff supervisions process in line with providers policy, meaning staff can provide a good level of care to people they support.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

How good is our setting?

4 - Good

We evaluated this key question as **good**, where several strengths impacted positively on outcomes for people, and clearly outweighed areas for improvement.

People benefitted from a warm, comfortable environment with sufficient space to meet their needs. The home was clean and welcoming and free from intrusive odours or noise. Some redecorating of the lounges, dining rooms, and corridors had been completed and there was an ongoing plan to complete this to keep the environment fresh. We saw some people's bedrooms had been redecorated and there was evidence in the service improvement plan of further planned redecoration of other bedrooms. People's rooms were clean, tidy, and personalised with their favourite ornaments, family photographs, and furniture. This means people are experiencing an environment which is fresh, homely, relaxed, welcoming, and peaceful.

The service had completed and implemented a Kings Fund audit. The purpose of this audit was to identify improvements that could be made to the environment to enable people who may have cognitive decline to navigate the home. An example of this was the use of much improved signage using description and pictures so people can quickly identify where to find toilets, the garden, and other areas of the home.

The housekeeping team had worked hard to maintain the cleanliness of the environment. Since the last inspection, the service had increased the numbers of housekeeping staff and redesigned shift patterns to ensure housekeeping staff were able to maintain the cleanliness of the home to a good standard. Housekeeping staff told us these changes had helped them consistently maintain good standards of cleanliness. People were protected from the spread of infection because cleaning schedules and regimes were based on good practice guidance and carried out at an effective frequency. We saw the safe management of people's clothing and linens, and the laundry area was clean and well maintained. All of this ensured people were living in a clean and comfortable setting.

Staff were clear about their responsibilities to report any issues with environmental cleanliness or maintenance to the person in charge, and we saw examples of this through the service's reporting procedures. Any faults or repairs reported were addressed in a timely manner. Maintenance checks had been carried out regularly to ensure all the relevant safety checks such as electrical, gas, and water were in place. People could be confident that they were living in a home that was safe and well maintained.

How well is our care and support planned?

4 - Good

We evaluated this key question as **good**, where several strengths impacted positively on outcomes for people, and clearly outweighed areas for improvement.

A substantial amount of work had taken place to get care plans updated and to better reflect people's individuality. This was still a work in progress but things were moving in the right direction. We discussed with the management, and they agreed, people and those who matter to them should have more input into the planning of people's care. This would ensure a consistent person-centred approach to care planning and better outcomes for individuals. The service also carried out monthly reviews of care in areas including people's weight, nutritional needs, and skin integrity. This enabled staff to respond to changes in people's health and offer timely and appropriate supports. We sampled care plans and found that there was sufficient information in place for staff to generally understand people's needs for support and how care should be delivered.

Six monthly reviews of care had taken place for some people. We could see where this had happened that families and relevant people were being invited to offer their views. The service had identified regular reviews of people's care as an area for improvement. They were able to provide details of the arrangement they have scheduled over the next two months to address this. We were confident the service would work hard to ensure they meet the legally required six monthly schedule. Having the most up-to-date information and understanding of people's needs and wishes means people can be confident they will experience high quality care and support.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

Taking into account the abilities and preferences of everyone experiencing care, the service should:

- a) ensure personalised programmes of activities are in place for individuals;
- b) develop a delivery framework and communicate planned activities; and
- c) regularly evaluate the level of available resources and the impact of meaningful engagement.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day' (HSCS 1.25).

This area for improvement was made on 29 June 2023.

Action taken since then

The service has begun to make improvement in providing meaningful activity by developing a programme of group events. However, there was no evidence available during this inspection that any of the elements of this area for improvement had been addressed. Meeting the elements of this area for improvement would ensure people's individual needs and wishes are being met.

This area for improvement has not been met and will be repeated

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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